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March 6, 2006

USPTO Refund Branch

Re: Patent Application 10/650,159
INTER-PROXIMAL DENTAL MATRIX BAND

Included documents demonstrate overpayment for extension of time. The total fee amounted to \$225.00. The initial installment was \$60.00 and was paid by credit card (documents enclosed). A subsequent extension request resulted in an additional \$165.00 (\$225-\$60). Because of time constraints, the latter extension request (02/06/06) was applied for by mail (cancelled check enclosed) and credit card (statement and document enclosed). The combined total represents an over-payment of \$165.00 Lam hereby applying for refund of said overpayment in the amount of \$165.00

Please advise me of any action I must pursue regarding this matter.

Sincerely

Dominic A. Viscomi, DDS

1868 Felicity La.

Hellertown, PA 18055 Phone/Fax: 484-851-3212

Some A. Vicion OAS

dviscomi@rcn.com

N PTC/SB/22 (12-04)

Approved for use twough 07/31/2006, OMB 0651-0031

Trademark Office; U.S. DEPARMENT OF COMMERCE

Formittion unless if displays a valid OMB control number.

Under the paperwork Reduction Act of 199	15, no persona are required to respond to a col	1900on of informittion urbans if dis	S. DEPARMENT OF COMMER IPINYS & valid OMB control num
PETITION FOR EXTENSION OF	TIME UNDER 37 CFR 1,136(a)	Docket Number (Option	enal)
	2005 Appropriations Act, 2005 (H.R. 4918).)	Viscomi-Visco	omi
Application Number 10/651,059		Filed 08/23/20	003
For Inter-Proximal dental Ma	atrix band	T lied	
Art Unit 3732		Examiner John J	. Wilson
This is a request under the provisions application.	s of 37 CFR 1.138(a) to extend the p		
The requested extension and fee are	22 follows (check time period desire	Id and enter the appropria	to fee below);
	Fee	Small Entity Fee	
One month (37 CFR 1.1	17(a)(1)) \$120	\$60	s <u>\$60</u>
Two months (37 CFR 1,	.17(a)(2)) \$450	\$225	5
Three months (37 CFR	1.17(a)(3)) \$1020	\$510	3
Four months (37 CFR 1	.17(a)(4)) \$1590	\$795	S
Five months (37 CFR 1.	17(a)(5)) \$2160	\$1080	\$
Applicant claims small entity statu	us. See 37 CFR 1.27.		
X A check in the amount of the f	ee is enclosed.		
Payment by credit card. Form	PTO-2038 is attached.		
The Director has already been	authorized to charge fees in this	B application to a Dence	sit Account
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I am the applicant/inventor	or.		
assignee of reco	ord of the entire interest. See 37 order 37 CFR 3.73(b) is enclosed	CFR 3.71. (Form PTO/SB/98)	
	it of record. Registration Number		<u></u>
attorney or ageny Registration num	t under 37 CFR 1.34, ber if eding under 37 CFR 1.34		
		100	1/2006
Signa	iture		1/2005 Partie
Dominic A. Viscomi Typed or pris	nted name	484-851-	-3212 ne Number
NOTE: Signatures of all the inventors of assignous signature is sequired, see below.	of record of the write interest or their recover	·	
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This collection of information is required by 37 CFR USPTO to process) an application. Confident to the	forms are submitted.  1.138(a). The information is required to obtain:	or retain a benefit by the public w	high is to the (and by the
USPTO to process) an application. Confidentially is complete, including gathering, preparing, and submits comments on the amount of time you require to compute to compute the confidence of the process of the Confidence of the Comment of the Comme	ring the completed application form to the USF plete this form and/or suggestions for reducing	TO. Time will very depending up this burden, should be sent to the	samed to take 6 minutes to run the individual case. Acc
Adjustment date: 03/22/2006 SDIRETA1* 02/07/2006 TL0111 00000022 10651059 01 FC:2252 -225.00 OP	istance in completing the form, call 1-800-PTC	9-9199 and select option 2.	
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PETITION FOR EXTENSION OF THE WILLIAM		plays a valid CMB control nu
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Option	nat)
FY 2005 [Fees pursuant to the Consolidated Appropriations Act, 2006 (N.R. 4018).]		
Application Number 10/851,059	Filed 02/06/08	
For Inter-Proximal Dental Matrix Band	F880 02700700	
Art Unit 3732		1 11 11
This is a request under the provisions of 37 CFR 1.136(a) to extend the penapplication.	Examiner John	J. Wilson
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Four months (37 CFR 1.17(a)(4)) \$1590	\$795	\$
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27.		
A check in the amount of the fee is enclosed. \$ 165.00 (\$	60.00 previously p	ald)
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WARNING: Information on this form may become public. Credit card information and authorization on PTO-2038.	ation should not be includ	ed on this form.
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assignee of record of the entire interest. See 37 CFI Statement under 37 CFR 3.73(b) is enclosed (Fo	R 3.71,	
attorney or agent of record. Registration Number	жи РТО/ <b>36/96</b> ).	
attorney of agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34		-
Signature	02/06/2	006
Dominic A. Viscomi	Dat	
	484-851-3	212
Typed or printed name	Telephone	Number
OTE: Bignetures of all the inventors or itseligness of record of the entire interest or their representative is required, see below.	ive(s) are required. Submit mult	ple forms if more than one
X Total of One forms are submitted		

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.13 and 1.14. This collection is estimated to take 6 minutes to complete, including gestering, preparing, and submitting the completed application form to the USPTO. Three will vary depending upon the includual case. Any U.S. Peters and Trademark Office, U.S. Department of time you require to complete the form endor suggestions for reducing the burden, should be sent to the Chief Information Officer, FORMS TO THIS ADDRESS. SEND TO: Commissioner for Petersh, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED

If you need equitance in completing the form, cell 1-800-PTO-9199 and select option 2.

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#### **FAX TRANSMITTAL**

Date: March 6, 2006

Page #s including cover: 8

To: Mail Stop Refund
Commissioner for Patents

Fax #: (571)-273-6500

From: Dominic A. Viscomi 1868 Felicity La. Hellertown, PA 18055

Phone/Fax: (484)-851-3212

Comments: Patent Application 10/651/059 RE: OVERPAYMENT